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EXAM. INITIAL	DOCUMENT NUMBER	DATE	INVENTOR/ASSIGNEE	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
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·	DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION YES/NO
	OTHER DOCUMEN	TS (INCLUDING	AUTHOR, TITLE, DATE, PE	RTINENT	PAGES, ETC.)	
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Examiner Eugene YUN			Date:			